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In the Claims:

Please withdraw claims 21 and 22 without prejudice.

1. (Currently amended) A method for modulating reducing the density and/or distribution of angiotensin II receptors in a mammal subject to fetal programming, having a history of: at least one of low birth weight, maternal undernutrition and interuterine undernutrition, comprising the step of administering an effective amount of an insulin-like growth factor-1 (IGF-1) compound sufficient to reduce angiotensin II receptors in the kidney of said mammal, wherein said reduction in angiotensin II receptors is associated with decreased systolic blood pressure.
2. (Original) The method of claim 1, wherein said IGF-1 compound is selected from the group consisting of IGF-1, IGF-2, des(1-3) IGF-1.
3. (Original) The method of claim 1 wherein the angiotensin II receptors are angiotensin II type 1 receptors and wherein their density, distribution, and potential for signal transduction are down-regulated.
4. (Withdrawn) The method of claim 1 wherein the angiotensin II receptors are angiotensin II type 2 receptors and wherein their density, distribution and potential for signal transduction are up-regulated.
5. (Original) The method of claim 1, wherein the mammal is human.
6. (Original) The method of claim 1, wherein said angiotensin II receptors are decreased in at least one tissue selected from kidney glomeruli, proximal tubules and distal tubules.
7. (Original) The method of claim 1, wherein the effective amount of said IGF-1 compound is administered in a form of a pharmaceutical composition including a pharmaceutically acceptable carrier thereof.

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8. (Withdrawn) The method of claim 1, wherein the effective amount of IGF-1 compound is administered by way of administration of a replicable vehicle encoding for said IGF-1.
9. (Original) The method of claim 1, wherein the effective amount of IGF-1 compound is administered by intramuscular injection, subcutaneous injection, intraperitoneal injection or by implant.
10. (Original) The method of claim 1, wherein the said effective amount of IGF-1 compound is administered through an intravenous, transdermal, transmucosal, oral or epidural route.
11. (Original) The method of claim 1, wherein the effective amount of said IGF-1 compound is between 0.1 µg/kg/day and about 1mg/kg/day.
12. (Withdrawn) A method for decreasing the expression of angiotensin II receptors in a mammal, comprising administering to said mammal an amount of a compound effective to increase the concentration of IGF-1 in said mammal.
13. (Withdrawn) The method of claim 12 wherein the increase of the concentration of IGF-1 or IGF-I analog is by about 0.1 µg/kg/day to about 1mg/kg/day.
14. (Withdrawn) A method for reducing hypertension associated with increased expression of angiotensin II receptors in a mammal, comprising the step of administering an effective amount of an IGF-1 compound along with an effective amount of an inhibitor of angiotensin converting enzyme (ACE).
15. (Withdrawn) The method of claim 14, wherein said ACE inhibitor is selected from the group consisting of captopril, cilazapril, enalapril, fosinopril, imidapril, lisinopril, moexipril, perindopril, quinapril, ramipril and trandolapril.

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16. (Withdrawn) A method for reducing hypertension associated with increased expression of angiotensin II receptors in a mammal, comprising the step of administering an effective amount of an IGF-1 compound along with an effective amount of an angiotensin II receptor antagonist.
17. (Withdrawn) The method of claim 16, wherein said angiotensin II receptor is selected from the group consisting of angiotensin II antagonist can be selected from a group that includes candesartan, irbesartan, losartan, telmisartan and valsartan.
18. (Withdrawn) A method for enhancing the antihypertensive and renoprotective properties of ACE inhibitors and angiotensin II antagonists comprising the step of administering to a mammal an effective amount of an insulin-like growth factor-I (IGF-I) compound, where an IGF-I compound comprises IGF-I, a biologically active IGF-I analog, a biologically active IGF-I mimetic, a compound that increases the concentration of IGF-I, or a compound that increases the concentration of IGF-I analogs in combination with the said ACE inhibitor or the said angiotensin II antagonist.
19. (Previously presented) The method of claim 3, further comprising administering an effective amount of an angiotensin converting enzyme (ACE) inhibitor.
20. (Previously presented) The method of claim 19, wherein said ACE inhibitor is selected from the group consisting of captopril, cilazapril, enalapril, fosinopril, imidapril, lisinopril, moexipril, perindopril, quinapril, ramipril and trandolapril.
21. (Withdrawn) The method of claim 3, further comprising administering an effective amount of an angiotensin receptor antagonist sufficient to decrease blood pressure to below a systolic blood pressure of about 140 mm Hg or a diastolic blood pressure above about 90 mm Hg.
22. (Withdrawn) The method of claim 21, wherein said angiotensin receptor antagonist is selected from the group consisting of candesartan, irbesartan, losartan, telmisartan and valsartan.

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23. (Previously presented) The method of claim 3, wherein the dose of IGF-1 administered is from about 0.1 µg/kg/day to about 1mg/kg/day.

24. (Currently amended) The method of claim 3, wherein the IGF-1 compound is selected from the group consisting of 1-3 IGF-1 (Gly-Pro-Glu; "GPE"), LR³IGF-1, LongTMR³IGF-1, [Arg³]IGF-1, [Ala³¹]IGF-1, des(2,3)[Ala³¹]IGF-1, [Leu²⁴]IGF-1, des (2,3)[Leu²⁴]IGF-1, [Leu⁶⁰]IGF-1, [Ala³¹][Leu⁶⁰]IGF-1, des(1-3)IGF-II and [Leu²⁴][Leu⁶⁰]IGF-1.

25. (Previously presented) The method of claim 3, wherein said angiotensin II type 1 receptors are in a human being.

26. (Previously presented) The method of claim 25, wherein said human being has a history of one or more of fetal undernutrition, low birth weight, hyperphagia, obesity, insulin resistance and hypertension.